PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifical	correspondence includir ed below or directed oth	or trans ng the F nerwise	smitting the ISSU atent, advance or in Block 1, by (a	JE FEE and PUBLICATI ders and notification of r i) specifying a new corres	naintenance fees w pondence address;	and/or	mailed to the current (b) indicating a sepa	corresp rate "Fl	ondence address as EE ADDRESS" for	
CURRENT CORRESPONDI	Feet	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
SHERIDAN R 1560 BROADW SUITE 1200	Lbe	Certificate of Mailing or Transmission I hereby certify that his Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE Fiel address above, or being facsimile transmitted to the USPT0 (57) 273-2888, on the date indicated below the USPT0 (57) 273-2888.								
DENVER, CO 8	0202								(Depositor's name)	
									(Signature)	
									(Date)	
APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVER		R AT		TORNEY DOCKET NO.		CONFIRMATION NO.	
10/711,710	10/711,710 09/30/2004		Robert Africa				6129-14		5709	
PORTION				VING RELATIVELY E				ELASTI		
APPLN, TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	SFEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES NO		19755 \$1,510	\$300	\$0	-6105 5 \$,810 03/02/2010		
EXAMINER		ART UNIT		CLASS-SUBCLASS						
HOEY, ALISSA L		3765		002-267000	_					
I. Change of correspondence address or indication of "Fee AddreCFR 1.863.) In hange of correspondence address for Change of Correspondence address for Change of Correspondence address for PTO/SB/122) attached. I Fee Address' Indication for "Fee Address" Indication for PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Changher is required.			Correspondence	(I) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	rinding on the patent front page, list anness of up to 3 registered patent attorneys to OR, alternatively, anne of a single firm (thiving as a member a ed attorney or agent) and the name is of up to name will be printed.					
PLEASE NOTE: Uni recordation as set forti (A) NAME OF ASSIG	ess an assignee is ident h in 37 CFR 3.11. Comp	ified be pletion o	low, no assignee of this form is NO	FHE PATENT (print or typ data will appear on the p I a substitute for filing an (B) RESIDENCE: (CITY Louisville, Colora	atent. If an assigna assignment. and STATE OR C			ocumen	: has been filed for	
Please check the appropri	iate assignee category or	categor	ries (will not be pr	inted on the patent):	Individual 🗹 Co	rporati	on or other private gro	up entit	y Government	
4a. The following fee(s): ☑ Issue Fee ☑ Publication Fee (N ☐ Advance Order - #	o small entity discount j		4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by redult card Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-1970. (enclose an extra copy of this form).							
	s SMALL ENTITY state	ıs. See 3	37 CFR 1.27.	☑ b. Applicant is no lon	ger claiming SMAI	LENT	TITY status. Sec 37 Cl	R 1.27	(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) w ites Pate	rill not be accepted int and Trademark	from anyone other than t Office.	he applicant; a regi	stered a	ittorney or agent; or th	e assign	iee or other party in	
Authorized Signature	/Hiwot A. Molla/				Date March					
Typed or printed name Hiwot A. Molla				Registration No. 65,900						
This collection of inform an application. Confident submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	application form to the ons for reducing this bu irginia 22313-1450. DO	U.S.C. U.S.C. USPTO rden, sh O NOT S	11. The informatic 122 and 37 CFR O. Time will vary ould be sent to the SEND FEES OR (on is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 r idual case. Any co r, U.S. Patent and D THIS ADDRESS	he publ minutes mment Traden i. SENI	ic which is to file (and to complete, includir s on the amount of tin ark Office, U.S. Dep. D TO: Commissioner	by the g gather ne you artment for Pater	USPTO to process) ing, preparing, and require to complete of Commerce, P.O. nts, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.